

Date: 15-03-2019

To

The Mandal Educational Officer,
Atchuthapuram Mandal,
Vishakapatnam District.

Sir,

Sub: Request to sanction the Medical Reimbursement in respect of SMT. E ARUNA KUMARI, Secondary Grade Teacher, MPPS Chippada, Atchuthapuram Mandal, Vishakapatnam District - Proposals submitted - Reg.

Ref: 1. G.O. Ms.No. 74, M&H Dept., dated: 15-03-2005.
2. G.O. Ms.No. 105, M&H Dept., dated: 09-04-2007.
3. Medical Bills issued by the Hospital concerned.

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With reference to the subject cited, I submit here with the Medical Bills with all the enclosures for Medical Reimbursement for an amount of Rs. 37460=00 (Rupees (Rupees Thirty Seven Thousand Four Hundred and Sixty Only) only), as I have undergone Treatment for the disease UNDER SPINAL ANESTHESIA ELECTIVE REPEAT LSCS WITH B/L TUBECTOMY in the Recognised Hospital by the Andhra Pradesh State Government i.e., at KRISHNA MATERNITY AND NURSING HOME during the period from 13-10-2018 to 18-10-2018 and onward transmit to the higher authorities for further necessary action in the matter at an early date.

Thanking You Sir.

Yours faithfully,

E. Aruna Kumari

(E ARUNA KUMARI)

Secondary Grade Teacher,
MPPS Chippada,
Atchuthapuram Mandal,
Vishakapatnam District.

Enclosures:

Essentiality Certificate
Emergency Certificate
Discharge Summary
Investigation Report

Medical Bills
Check List
Non-Drawl Certificate

OFFICE OF THE MANDAL EDUCATIONAL OFFICE, MANDAL PRAJA PARISHAD

DISTRICT: VISAKHAPATNAM

From:
The Mandal Educational Office,
Mandal Praja Parishad,
District Visakhapatnam.

To
The District Educational Officer
Visakhapatnam

Lr.No. 77/MEO-ATPM/2019 Dated: 20-03-2019

Sir,

Sub:- Medical Attendance - Inpatient Medical Reimbursement of Sri/Smt.E ARUNA KUMARI, SECONDARY GRADE TEACHER, MPPS CHIPPADA, Mandal:ATCHUTAPURAM MANDAL, Dist:VISAKHAPATNAM - Submission for sanction - regarding.

- Ref:-
- 1) G.O.Ms.No.74, Dated:15-03-2005.
 - 2) G.O.Ms.No.68 H,M&FW(K1) Dept, Dated:28-03-2011.
 - 3) G.O.Ms.No.40, Dated:07-05-2002.
 - 4) Individuals Application Dated:.....

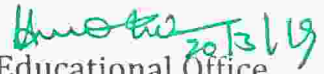


With reference to the subject cited above I submit here With the Inpatient Medical Reimbursement proposals of Sri/Smt.E ARUNA KUMARI, SECONDARY GRADE TEACHER, MPPS CHIPPADA, Mandal:ATCHUTAPURAM MANDAL, Dist:VISAKHAPATNAM. He/She was under gone treatment for UNDER SPINAL ANESTHESIA ELECTIVE REPET LSCS WITH B/L TUBECTOMY at KRISHNA MATERNITY AND NURSING HOME, VISAKHAPATNAM, from:13-10-2018 to 18-10-2018.

I submit herewith the original bills, necessary documents for reimbursement of medical expenses of above treatment. Kindly scrutinize the bills and take necessary action for sanction.

Thanking you. Early action solicited.

Yours faithfully


Mandal Educational Office
Mandal Praja Parishad
Mandal Educational Officer
M.P. Atchutapuram Mandal
Visakhapatnam-531 011

Encl:-

- 1.Checklist
- 2.Appendix II
- 3 Non Drawn certificate
- 4 Dependant certificate
- 5 Hospital Recognition G.O.
- 5.Emergency certificate
- 6.Essentiality certificate
- 7.Discharge summary
- 8.Original Medical Bills

CHECK LIST

(Vide Rc No.8878/D3-4/2009,Dt.02-09-2009 of C & DSE AP, Hyderabad)

1	Name and Address of the employee Employee code	SMT. E ARUNA KUMARI Secondary Grade Teacher MPPS Chippada, Atchuthapuram Mandal, Vishakapatnam District.
2	If Retired a)Date/Year of Retirement	
	b)Designation	
	c) P.P.O.NO	
3	Communication of the Applicant Address For all purposes with cell no.	Secondary Grade Teacher MPPS Chippada, Atchuthapuram Mandal, Vishakapatnam District. cell no.
4	Dates of Treatment	From: 13-10-2018 To: 18-10-2018
5	Name and Address of Hospital	KRISHNA MATERNITY AND NURSING HOME
	a)Whether Private Hospital (or) Recognized Hospital	RECOGNISED
	b)Whether referral Letter Produced (or) Recognized orders to be enclosed along with the proposals	YES / NO
6	Whether the Medical Reimbursement Proposal sent with in 6 Months from the Date of Discharge	YES / NO
7	Whether the Following are Enclosed	
	1)Appendix-II duly attested by the Head of the office/DDO	YES / NO
	2)Emergency Certificate	YES / NO
	3)DischargeSummary	YES / NO
	4)	
	5) Non drawl Certificate	YES / NO
	6)Essentially certificate, attested by the authorized doctor, who undertakes treatment	YES / NO
	7)If the Patient is dependent on the Govt.Employee-Un Employee certificate and dependency certificate are to be enclosed with the Medical Reimbursement Proposals	Not Applicable
	8)In case of the dependents of deceased Govt.Employee/Retired employee whether legal heir certificate in enclosed (or) not.	
9)Whether the Medical reimbursement proposal is prepared and submitted with reference to G.O.Ms.No.74 H.M. & FW(K1) Dept. Dt. 15-03-2005 and G.O.Ms.No.60 HM &(K1) Dept.Dt 09-04-2007 and also G.O. Ms No 180 dt.11-05-2006.		
8	Whether the medical Reimbursement claim is processed through the drawing officer and received with in the stipulated time.	
9	And whether the availment of No. of Instalments recorded (or) not	YES
10	Whether an entry is Made in the Service Register (or) not for previous claim	

E. Aruna Kumari
Signature of the
Government Servant

Arunko
Signature of
Mandal Control Officer
M.P. Atchutapuram Mandal
Vishakapatnam-531 011
20:03:2019

APPENDIX - II

APPLICATION FOR CLAIMING REFUND OF MEDICAL EXPENSES INCURRED IN CONNECTION WITH MEDICAL ATTENDANCE AND TREATMENT OF GOVERNMENT SERVANT AND THEIR FAMILIES

1	Name, Designation & Section of Government Servant (in block letters)	SMT. E ARUNA KUMARI SECONDARY GRADE TEACHER
2	Office in which Employed	MPPS Chippada, Atchuthapuram Mandai, Vishakapatnam District.
3	Pay of the Government Servant as defined in F.Rs. and other employments which should be shown separately	22460-66330 / 28940
4	Place of Duty	MPPS Chippada, Atchuthapuram Mandal, Vishakapatnam District.
5	Full Residential Address with door number, name of the Mohalla and District	W/o B Thata Babu D No 31-38-282/3/1, Hari Puri Colony, Rasamma Colony, Duvvada, Gajuwaka. PIN - 530046
6	Name of the Patient, his/her relationship to the Government Servant, in case of children state age also	Smt. E Aruna Kumari, (self) Aged 30 Years
7	Place at which the patient fell ill	Krishna Maternity and Nursing Home
8	Nature of illness and its duration	UNDER SPINAL ANESTHESIA ELECTIVE REPEAT LSCS WITH B/L TUBECTOMY From: 13-10-2018 To: 18-10-2018
9	Details of amount claimed, cost of Medicines purchased from the market/ list of Medicines purchased with cash memos, and the Essentiality Certificate should be attached each in duplicate signed	List of Medicines in detailed and Essentiality Certificates are enclosed
10	Total amount claimed	Rs. 37460=00 (Rupees Thirty Seven Thousand Four Hundred and Sixty Only)
11	List of Enclosures	Essentiality Certificate Emergency Certificate Discharge Summary Investigation Report Medical Bills Check List Non-Drawl Certificate

I here by declare that, the statements in this application are true to the best of my knowledge and belief and that the person for whom Medical Expenses were incurred is a member of my family as defined under the Govt. Servant Medical Attendance Rules and wholly dependent upon me.

E. Aruna Kumari

Signature of the
Government Servant

[Signature]
20.03.2019

Signature of the
Head of the Office

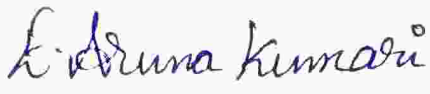
Head of the Office
M.P.P.S. Chippada Mandai
Vishakapatnam-531 011

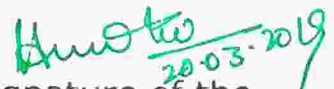
NON DRAWL CERTIFICATE

(As per instructions issued in C & DSE, A.P., Hyderabad Procs. Rc.No. 8878/D3-4/2009, dated: 02-09-2009)

This is to certify that, the amount of Rs. 37460=00 (Rupees (Rupees Thirty Seven Thousand Four Hundred and Sixty Only) only) is being claimed now in this bill by SMT. E ARUNA KUMARI, Secondary Grade Teacher, MPPS Chippada, Atchuthapuram Mandal, Vishakapatnam District has not been paid previously towards Medical Reimbursement in respect of SMT. E ARUNA KUMARI (Self), age (30) who has undergone the Treatment for the disease UNDER SPINAL ANESTHESIA ELECTIVE REPEAT LSCS WITH B/L TUBECTOMY during the period from 13-10-2018 to 18-10-2018 in the Recognised Hospital By the Andhra Pradesh State Government i.e., at KRISHNA MATERNITY AND NURSING HOME as per the records available regarding the Medical Reimbursement defined under the Government Medical Attendance Rules, 1972

A note to that effect has also been made in the records of the school.


Signature of the
Government Servant.


Signature of the
Drawing & Disbursing Officer.
Mandal Educational Officer
M.P. Atchutapuram Mandal
Visakhapatnam-531111

PROCEEDINGS OF THE DIRECTOR OF MEDICAL EDUCATION: A.P. VIJAYAWADA
Present:- Dr. K.Babji, M.S., Mch.,

Procdgs. No.24781/P3-A/2016,

Dt.26-09-2018.

- Sub:- D.M.E. – A.P.I.M.A. Rules 1972 –Recognition of M/s Krishna Maternity & Nursing Home, Visakhapatnam as referral hospital for the purpose of treatment to State Government Employees, Retired Pensioners and their dependents, M.L.As., Ex. M.L.As. and other categories of persons as per rules Orders Issued.
- Ref:- 1. G.O. Ms. No. 162 HM&FW (K.1) Deptt. Dated 23-05-2005.
2. G.O. Ms. No. 477 HM&FW (K.1) Deptt. Dated. 30-08-2005.
3. Inspection report no.4640/G6/2016, Dated. 17-11-22016 from the Superintendent, KGH, Visakhapatnam.
4. This office Proc.No.24781/P3/Lc.B/2007, Dt. 02-12-2016 orders are valid from 02-12-2016 to 01-12-2017.
5. This office Proc.No.24781/P3/Lc.B/2007, Dt.03-10-2017 orders are valid from 02-12-2017 to 31-05-2018.

ORDER:-

In exercise of the powers delegated to him in the references cited, the Director of Medical Education, Andhra Pradesh, Vijayawada is pleased to accord Renewal of Recognition to **M/s Krishna Maternity & Nursing Home, Visakhapatnam** as referral hospital for OBG treatment to the categories mentioned in the subject on reimbursement basis under the following conditions (out & in patients).

1. The Hospitals should give free treatment to white card holders or below poverty line to a minimum 5% of bed strength (for inpatient services).
2. The Hospital should give free medical treatment to students of S.C. / S.T. / B.C. residential schools, S.T. Ashrama Schools, S.T. Hostels, G.V.V.K. Schools and Maabadi Schools.
3. The Hospital should provide better medical and health services including free diagnostic conducting health camps, once in a month in two villages which are mentioned in the M.O.U.
4. The Hospital should submit monthly return in the prescribed format.
5. The Hospital concerned should charge for all medical / surgical / diagnostic services given by them under this scheme, as per the package rates prescribed by Government of India, Ministry of Health and family Welfare for C.G.H.S., Hyderabad and as adopted by the State Government in G.O. Ms. No. 74, HM&FW (K.1) Department, Dated. 15-03-2005 or as may be prescribed by the State Government or the Director of Medical Education from time to time. The Director of Medical Education / Scrutinizing authority shall verify and ensure that the charges levied by the Private Hospitals are as per the above rates, before certifying the net admissible amount. If the rates of Private Hospitals are less than the C.G.H.S. package rates / Government rates as per annexure to the said G.O. the lowest rates of Private Hospitals shall be accepted for scrutiny and payment.
6. The Hospital should pay Rs. 30,000/- (Rupees Thirty Thousands only) towards inspection fee in every year.
7. All other guidelines mentioned in the references should be followed scrupulously.
8. The permission accorded to the hospital is liable for cancellation and such other action as deemed fit, including de-recognition of the hospital and initiate criminal action as per law against the hospital, whenever the State Government forms the opinion based on inspection or enquiry into the allegations that the said Private Hospital is not providing treatment to the State Government Employees / Retired Employees and their dependents etc., as stipulated above and violates the conditions mentioned therein, and indulge any irregularities in respect of excess / bogus claims, cheating the patient or Government or resorting to any unlawful activities etc., after giving fifteen (15) days notice to the hospital and pass appropriate orders, after considering the representation, if any, offered by the said Hospital.
9. These orders are valid from 01-06-2018 to 03-03-2019.
10. All scrutinizing officers should follow these guidelines in admitting the bills.

Sd/-Dr. K. Babji,
Director of Medical Education

// Attested//

for Director of Medical Education

To:
M/s Krishna Maternity & Nursing Home, "Ramchander", # 43-5-53, Railway New Colony,
Visakhapatnam.
The CEO, Dr.NTRVaidyaSeva Trust, Chuttugunta, Guntur
All the Heads of Departments.
The Pay and Accounts Officer, Ibrahimpatnam, Vijayawada.
All the District Treasury Officers in the State.

M.P. Atchutapuram
20 09 2018
Mandal Educational Officer
M.P. Atchutapuram Mandal
Visakhapatnam-551011

APPLICATION FOR STERILISATION OPERATION AND INFORMED CONSENT

Dr. K Kamala, M.B., B.S.
Krishna Maternity & Nursing Home
"RAMCHANDER"
D No 43-5-53, Railway New Colony
Visakhapatnam - 530016.

Dear Madam,

Kindly make arrangements for my sterilization operation. I am married and my husband/wife is alive. My age is 30 years and my husband/wife's age is 28 years. My husband/wife has not undergone sterilization previously. We have male and 1 female living children. The age of my youngest living child is 1 day years.

- n) I have decided to undergo sterilization operation on my own volition without any outside pressure, inducement or force
- o) I am aware that other methods of contraception are available to me
- p) I know that for all practical purposes this operation is permanent and that, after the operation I will not be able to give birth to any more children
- q) I am aware that I am undergoing operation, which carries an element of risk
- r) I have been explained the eligibility criteria for the operation and I affirm that I am eligible to undergo operation according to criteria
- s) I agree to undergo the operation under any type of anesthesia, which the doctor/health facility thinks suitable for me, and to be given other medicines as considered appropriate by the doctor/health facility
- t) I affirm that I am aware that there are still some chances of failure of the operation for which the operating doctor and health facility will not be held responsible by my relatives or me or any other person whomsoever
- u) If after the sterilization operation, there is any missed menstrual cycle of mine/my spouse, then I shall report within two weeks to the doctor/health facility and will get MTP done free of cost
- v) In case the sterilization operation is a failure, the Oriental Insurance Company Limited will pay a compensation of Rs. 20,000/- (Rupees Twenty thousand only) under the Family Planning Insurance Scheme of Government of India, to me, which will be acceptable to me.
- w) That if I/my spouse get/s pregnant after failure of sterilization operation and is unable to get the pregnancy aborted within two weeks, then I will not be entitled to claim any compensation over and above the compensation under Family Planning Insurance Scheme from any court of law in this regard or any compensation for upbringing the child
- x) I agree to come for follow-up to the Hospital/Institution/Doctor/Health facility as instructed, failing which I shall be responsible for the consequences, if any

I have read the above information,

1. Name: Shri / Smt. E. Aruna Kumari

2. Husband / Wife name and address:

7. Father's name and address

8. Religion

9. Education Qualification

10. Business / Occupation

w/o. B. Thata Babu
-DNo:- 31-38-282/31,
Rabalamma colony,
Duvvada, Gajuwaka,
VSP.

Gout-Teacher

E. Aruna Kumari
Signature of the acceptor/applicant

The above information has been read out and explained to the beneficiary in her own language and he/she has signed after fully understanding the same.

*(Only for those beneficiaries who can not read and write)

[Signature]
Signature of counselor

Krishna Maternity & Nursing Home

"RAMCHANDER"

43-5-53, Rly New Colony

VISAKHAPATNAM - 530016

[Signature]
M.P. Achutanarain Mandal

Shri / Smt E. Aruna Kumari has been explained other methods of contraception available and the failure associated with other methods have been explained fully.


** Signature of Counselor

Full Name


Full Address

Krishna Maternity & Nursing Home
"RAMCHANDER"
43-5-53, Railway New Colony,
VISAKHAPATNAM - 530016
Phones: 2720769, 2735571

I certified that I have satisfied myself that

- 1) Shri/Smt E. Aruna Kumari is within the eligible age group and is mentally and medically fit for a sterilization operation.
- 2) There is no evidence that he / she has undergone a sterilization operation previously.
- 3) I have explained all clauses to the client and that this form has the authority of a legal document.
- 4) I have filled the checklist and followed the guidelines for sterilization procedures laid down by Government.

Signature of operating Doctor
(Name and Address with Seal)


Signature of Medical Officer-in-Charge of Hospital
Dr. K KAMALA, M.B., B.S.
Regd. No. 13961

Krishna Maternity & Nursing Home
"RAMCHANDER", D No. 43-5-53,
Railway New Colony, Visakhapatnam-16

Krishna Maternity & Nursing Home
"RAMCHANDER"
43-5-53, Railway New Colony,
VISAKHAPATNAM - 530016
Phones: 2720769, 2735571

DENIAL OF STERILIZATION

I hereby that Shri/Smt _____ is not a suitable client for re-sterilization for the following reasons.

- 1.
- 2.

He / She has been provided the following alternative methods of contraception.

Signature of Councillor***
Or Doctor making Decision
(Name and Address)


**Counsellor can be any health personnel including doctor.

ANNEXURE - I
STERILISATION CERTIFICATE

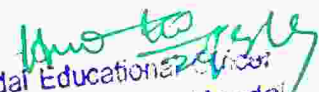
I Dr. K. KAMALA hereby certify that I have conducted TUBECTOMY Operation to Smt. E. Aruna Kumari w/o Sri B. Thota Babu employed as Pvt in Krishna Maternity & Nursing Home at my Nursing Home on date 13/10/18 with 2 Female (Male + Female) living children.

*A sperm count was undertaken on (date) _____ and on the basis thereof, it is certified that the vasectomy operation has been completely successful.

(* applicable in the case of Vasectomy persons only)


Signature of the medical officer
(Dr. K. KAMALA, M.B.B.S.)
Regd No. 13961
KRISHNA MATERNITY NURSING & HOME
Railway New Colony
Visakhapatnam - 530 016.
Krishna Maternity & Nursing Home
M. P. Atchutapuram Mandal
42-5-47, Rly New Colony
VISAKHAPATNAM
Phones : 2720700, 2720701

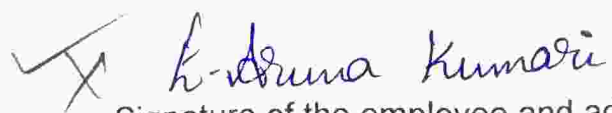
Mandal Educational Officer
M.P. Atchutapuram Mandal
Visakhapatnam-531 011



Mandal Educational Officer
M.P. Atchutapuram Mandal
Visakhapatnam-531 011

UNDERTAKING TO BE GIVEN BY ALL GOVERNMENT EMPLOYEES

I / My spouse have / has undergone Vasectomy / Tubectomy operation at Krishna Maternity and Nursing Home, Railway New Colony, Visakhapatnam on date 13/10/18. Necessary sterilization Certificate issued by Dr. K. KAMALA is enclosed. In case I / my spouse have to take resort to recanalisation for any reason whatsoever I undertake to report this fact forthwith to the Government,

I also certify that my wife Smt. _____ is not pregnant on this day.


Signature of the employee and address


Mandal Educational Officer
M.P. Atchutapuram Mandal
Visakhapatnam-531 011

KRISHNA

Maternity & Nursing Home


Regd No. 78

"Ramchander" # 43-5-53,
Railway New Colony,
Visakhapatnam-16.
☎ 0891-2720769, 2735571

Date: 18.10.2018

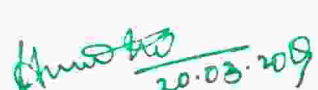
EMERGENCY CERTIFICATE

This is to certify that Smt. ARUNA KUMARI E, Female, 30 Years, admitted in our Hospital on emergency basis on 13-10-2018, under the care of Dr. P.P.S. MURTHY., M.D., DGO for treatment of Under Spinal Anesthesia Elective Repeat LSCS with B/L Tubectomy done on 13-10-2018. She was treated and Discharged on 18-10-2018.


Dr. P.P. Srisivasa Murthy MD., DGO
Regd. No. 9255 Addl. Director
Rtd. Professor & Head of Dept. of
Obstetrics & Gynaecology
ANDHRA MEDICAL COLLEGE,
CIVIL SURGEON
King George Hospital
VISAKHAPATNAM-580016


(Dr. K. KAMALA)

Krishna Maternity & Nursing Home
"RAMCHANDER"
43-5-53, Rly New Colony,
VISAKHAPATNAM - 530016
Phones : 2720769, 2735571


Mandal Educational Officer
M.P. Atchutapuram - Mandal
Visakhapatnam-531 011

KRISHNA

Maternity & Nursing Home

Regd No. 78

"Ramchander" # 43-5-53,
Railway New Colony,
Visakhapatnam-16.
☎ 0891-2720769, 2735571

INVESTIGATION

Reports enclosed.

CONDITION AT DISCHARGE

GC - Fair ; T,PR - Normal ; BP - 110/80 mmhg
P/A - Uterus retracted well ; O/E - No active bleeding P/v

DISCHARGE ADVICE

MOTHER -

- 1. TAB. TAXIM O 200 MG 10 - TWO PER DAY FOR FIVE DAYS
- 2. TAB. PANTOP 40 MG 05 - ONE PER DAY FOR FIVE DAYS
- 3. TAB. EMANGEN - D 10 - TWO PER DAY FOR FIVE DAYS
- 4. TAB. IRON 30 - ONE PER DAY FOR ONE MONTH
- 5. TAB. CALCIUM 30 - ONE PER DAY FOR ONE MONTH
- 6. TAB. MULTIVITAMIN 30 - ONE PER DAY FOR ONE MONTH
- 7. CAP. LACTARE 60 - TWO PER DAY FOR ONE MONTH
- 8. SYP. ELIXIR NEOGADINE 2 TABLE SPOON TWICE A DAY
- 9. OINT. SOFINOX APPLY TWICE A DAY

B.No:
21163

BABY :-

- 1. EBF Burping
- 2. Warm Care
- 3. VIT D3 DROPS 5 DROPS TWICE A DAY
- 4. MULTIVITAMIN DROPS 5 DROPS TWICE A DAY
- 5. DREZ POWDER

FOLLOW UP INSTRUCTIONS

- 1. REVIEW AFTER ONE WEEK FOR SUTURE REMOVAL
- 2. BED REST FOR SIX WEEKS
- 3. ABSTINENCE FOR THREE MONTHS

WHEN AND HOW OBTAIN URGENT CARE

PAIN, OVER / HEAVY DISCHARGE, ANY PROBLEM RELATED TO
BABY

CONTACT NO - 0891 2720769

Resident Doctor



Verified By

Dr.P.P.S MURTHY (MD.DGO), MD., DGO
CONSULTANT GYNAECOLOGIST



Krishna Maternity & Nursing Home
Krishna "RAMCHANDER"
43-5-53, Riv New Colony,
D. VISAKHAPATNAM 530016
PH: 0891-2720769, 2735571

Mandal Educational Officer
M.P. Atchutapuram Mandal
Visakhapatnam-531 011

KRISHNA

Maternity & Nursing Home

Regd No. 78

"Ramchander" # 43-5-53,
Railway New Colony,
Visakhapatnam-16.
☎ 0891-2720769, 2735571



DISCHARGE SUMMARY

Patient Name	: Mrs. ARUNA KUMARI E	Admission No	: IP1426
Age/Gender	: 30 Years/Female	UMR No	: UMR7280
Consultant	: Dr.P.P.S MURTHY (MD.DGO)	Ward	: PRE-LABOUR ROOM/PLR2
Department	: GYNAECOLOGY	Admitted Date	: 13-Oct-2018 11:23 am
Address	: D NO 31-38-282/3/1, RASAIAMMA COLONY, DUVVADA, GAJUWAKA, VSP. VISAKHAPATNAM , ANDHRA PRADESH 9966284574	Discharge Date	: 18-Oct-2018 4:18 pm

DIAGNOSIS

: G2 P1 L1 with 37 weeks POG with post LSCS breech PROM with GDM

CLINICAL SUMMARY

: Reason for admission
E ARUNA KUMARI , Age - 30 Years. LMP - 25/01/2017. EDD - 01/11/2018
MH - Regular cycles : ML - 3 yrs
P/H - Nil significant ; F/H - DM + HT
From 8th month GDM on Tab. Obimet 500mg Bd
G1 - Term, LSCS, F CH, 1 year 10 months
G2 - PP

OPERATION NOTES / TREATMENT GIVEN

[Redacted text]

1. INJ. MONOCEF 1 GM BD FOR THREE DAYS
2. INJ. PANTOP 40 MG OD FOR THREE DAYS
3. INJ. TRAMADOL BD FOR THREE DAYS
4. I V FLUIDS RL 2 UNITS , DNS 2 UNITS , 5% DEXTROSE 1 UNIT

Mandal Educational Officer
M.P. Atchutapuram Mandal
Visakhapatnam-531 011

ESSENTIALITY CERTIFICATE

CERTIFICATE-B

(To be completed in the case of patients WHO ARE ADMITTED to Hospital for treatment)

Certificate granted to Mrs./~~Mr.~~/Miss ARUNA KUMARI E.....
wife /son/daughter of Mr./Mrs./Miss THOTA BABU.....
employed in

PART-A

I, Dr. P.P.S. MURTHY..... hereby certify :-

- (a) that the patient was admitted to hospital on the advice of P.P.S. MURTHY..... (name of the medical officer)/on my advice;
- (b) that the patient has been under treatment at and that the undermentioned medicines prescribed by me in this connection were essential for the recovery/prevention of serious deterioration in the condition of the patient. The medicines are not stocked in the (name of the hospital) for supply to private patients and do not include proprietary preparations for which cheaper substances of equal therapeutic value are available not preparations which are primarily foods, toilets or disinfectants.

NAME OF MEDICINES

PRICE

- 1.
- 2.
- 3.
- 4.
- 5.

Bills Are Enclosed

- (c) that the injections administered were/were not for immunising of prophylactic purposes;
- (d) that the patient is/was suffering from LSCS..... and is/was under treatment from 13-10-18 to 18-10-18;
- (e) that the X-ray, laboratory test etc. for which an expenditure of Rs..... was incurred were necessary and were undertaken on my advice at (name of hospital or laboratory);
- (f) that I called on Dr. for specialist consultation and that the necessary approval of the (name of the Chief Administrative Medical Officer of the State) as required under the rules, was obtained.

*M.P. Chitapuram Mandal
Visakhapatnam*

No. _____
Name of the Park _____

:2:

PART B

I certify that the patient has been under treatment at the **KRISHNA MATERNITY & NURSING HOME** hospital and that the service of the special nurses for which an expenditure of Rs..... was incurred, vide bills and receipts attached, were essential for the recovery/prevention of serious deterioration in the condition of the patient.

(Handwritten signature)

Signature of the Medical Officer-in-charge
of the case at the hospital
Krishna Maternity & Nursing Home
"RAMCHANDER"

COUNTERSIGNED

43-5-63, Rly New Colon,
VISAKHAPATNAM - 530016
Phones : 2720169, 2735571

I certify that the patient has been under treatment at the **KRISHNA MATERNITY & NURSING HOME** hospital and that the facilities provided were the minimum which were essential for the patient's treatment.

Medical Superintendent
DR. KAMALA

Place **VISAKHAPATNAM**

KRISHNA MATERNITY & NURSING HOME
Hospital
Visakhapatnam



NOTE:- CERTIFICATES NOT APPLICABLE SHOULD BE STRUCK OFF. CERTIFICATE (B) IS COMPULSORY AND MUST BE FILLED IN BY THE MEDICAL OFFICER IN ALL CASES.

* The minimum facilities certificate may be signed either by the Medical Superintendent of the Hospital concerned or another Gazetted Medical Officer who has been authorised in this behalf by the Medical Superintendent. (G.I.M.H., O.M. No.F-2-35/52-LSG (H.I.) dated 19.9.1958)

(Handwritten signature)
20-03-2019
Mandal Educational Officer
M.P. Achutapuram Mandal
Visakhapatnam-531 011

NA MATERNITY & NURSING HOME

Reg. No. 78

amchander" D.No. 43-5-53, Rly. New Colony, Visakhapatnam - 530 016.

Phone : 0891- 2720769, 2735571

DRUGS USED IN OPERATION THEATRE

Sl. No.: **6343**

DUOT/

Date: 13/10/18

Name of the Patient : E. Aruna Kumari Sex: ♀ Age: 30y
 Patient Room/ Bed No. : R/ Date of Admission : 13/10/18
 Nature of Operation : C.S.C.S.
 Date & Time of Operation : 13/10/18 / at 12.30pm.
 Name of the Surgeon : Dr. P.P.S. Murthy.
 Name of the Anesthesiologist : Dr. K. Kamesh.
 Name of the OT Assistant : Sripriya Chow Rao

The following Drugs / Operation Utilities have been used in the Operation Theatre during the course of the above operation. The same may please be purchased and handed over to the Nursing Home as replacement. (Some of the drugs are for post operative use and will be retained with the patient).

INJ LOX 5% <u>1</u>	I V SET <u>1</u>
INJ ADRENALINE <u>1</u>	INTRACATH <u>20</u> <u>1</u>
INJ ATROPINE <u>1</u>	EASYFIX <u>1</u>
INJ FORTWIN <u>1</u>	BLADE NO <u>22</u> <u>2</u>
INJ PHENERGAN <u>1</u>	SPINAL NEEDLE <u>25</u> <u>1</u>
INJ VITAMIN K <u>1</u>	NELCATH NO 12 <u>1</u>
INJ TRAMADOL <u>5</u>	UROBAG <u>1</u>
INJ ONDANSETRON <u>1</u>	INFANT FEEDING TUBE <u>7</u> <u>1</u>
INJ OXYTOCIN <u>1</u>	GLOVES <u>7</u> <u>4</u> <u>6 1/2</u> <u>4</u>
INJ METHERGIN <u>1</u>	GLOVES <u>1</u>
INJ RANTAC <u>1</u>	DISPOSIBLE SYRINGES 10CC <u>9</u>
INJ DICLOFENAC <u>2</u> ✓	DISPOSIBLE SYRINGES 5CC <u>6</u>
INJ MONOCEF 1 GM <u>10</u>	DISPOSIBLE SYRINGES 2CC <u>6</u>
INJ TAXIMAX 1.5 GM <u>1</u>	SPIRIT <u>1</u>
I V FLUIDS <u>1</u>	BETADINE SCRUB <u>1</u>
RL <u>4</u>	BETADINE SOLUTION <u>1</u>
DEXTROSE 5% <u>1</u> (1)	COTTON <u>1</u>
DNS <u>3</u>	BANDAGES <u>10</u>
NS <u>1</u>	KLICK CLAMP <u>1</u>
CHROMIC CATGUT <u>NOT</u> (1)	MEDITAPE <u>1</u>
CHROMIC CATGUT <u>1-0</u> (1)	BABY SHEET <u>1</u>
PROLENE <u>NOT</u> (1)	
<u>4</u> Panty <u>4</u> <u>3</u>	
<u>4</u> Tab <u>1</u> (1)	

Date: 13/10/18

Dr. P.P.S. Murthy
 Regd. No. 78
 Rtd. Pres. Secy. to Govt. Dept. of Health

Signature of the Doctor OT Assistant

The above drugs have been received as replacement in the Operation Theatre.

Date: M.F. Atchannaidu
 Visakhapatnam - 530 016

CHIEF NURSE
 King George Hospital
 VISAKHAPATNAM

Signature of the Doctor OT Assistant

KRISHNA MEDICAL & GENERAL STORES

D No. 43-5-55, Rly. New Colony, Visakhapatnam - 16

Bill No. : 20.857

D.L.No. : 426/AP/VM/V/2003/RN
 Ess Reg No. : 1 01 14 028 000423

GST : 37AEQPK4594R12A
 Date : 13/10/18

Patient : MS E ARUNA KUMARI

Doctor : DR. K. KAMALA

Description	HSN	Batch No.	Exp. Dt	Qty.	GST %	Our Sale Price	Incl GST	MRP
-------------	-----	-----------	---------	------	-------	----------------	----------	-----

ANABIN (INJECTION) ~ 4ml	3003	KP1713252	10/19	1	12.00	25.15		26.00
ATROPINE (INJECTION) ~ 1ml	3004	KP38023	12/19	1	5.00	3.74		3.74
BANDAGES 6 (SURGICAL) ~	3005	570/18	06/21	1	12.00	18.28		23.40
BANDAGES 6 (SURGICAL) ~	3005	570/18	06/21	9	12.00	170.91		210.60
BLADE NO 22 (SURGICAL) ~	9018	160218	06/22	2	12.00	8.26		8.00
CERVISURE (TABLET) ~ 600mg	3003	339000183GDT001	09/19	1	12.00	70.50		75.40
CHROMIC 0 4242 RELY (SURGICAL)	9018	33990 NFI1818	05/23	1	12.00	128.88		141.00
CHROMIC 1 4227 RELY (SURGICAL)	9018	33990 NDI1907	03/23	1	12.00	191.50		215.00
COTTON (SURGICAL) ~ 100gm	3004	099/18	06/21	1	12.00	54.54		69.00
DEXTROSE 5 PERCENT (IV FLUIDS)	3004	50201D81305	03/21	1	12.00	30.20		32.08
DISPOVAN 10CC (DISPOSABLE SYRINGE) ~	9018	XXXXXXXX	03/23	9	12.00	54.54		76.50
DISPOVAN 2CC (DISPOSABLE SYRINGE) ~	9018	830025NC2	06/23	6	12.00	13.32		27.00
DISPOVAN5CC (DISPOSABLE SYRINGE) ~	9018	634052NE1	07/21	6	12.00	18.18		33.00

KRISHNA MEDICAL & GENERAL STORES

D No. 43-5-55, PLY. New Colony, Visakhapatnam - 16

Bill No. : 20,857

D.L.No. : 426/AP/VM/V/2003/RM
 Ess Reg No. : 1 01 24 028 000423

GST : 37AEQPK4594R1ZA
 Date : 13/10/18

Patient : MS E ARUNA KUMARI

Doctor : DR. K. KAWALA

Description	HSN	Batch No.	Exp. Dt	Qty.	GST %	Our Sale Price	Incl GST	MRP
DNS(IV FLUIDS) ~	3004	10180595C	06/21	3	12.00	87.87	96.81	
DOLUS(INJECTION) ~ 2ml	3003	2000 DISTJ01	09/19	5	12.00	95.95	106.40	
EASY FIX LEUKOPED(SURGICAL) ~	9018	807006	06/21	1	12.00	20.00	35.00	
GLOVES NO 6.5 G(SURGICAL) ~	4015	18E29554	08/23	4	12.00	120.00	260.00	
GLOVES NO 7G(SURGICAL) ~	4015	18I2955KV	08/23	4	12.00	119.60	260.00	
I V SET(INJECTION) ~	3004	18H320	07/21	1	12.00	20.40	140.00	
INFANT FEEDING TUBE 7(SURGICAL) ~	9018	618052329	04/23	1	12.00	15.76	46.00	
INJEK(INJECTION) ~ 0.5ml	3004	1255002	06/19,	1	12.00	16.18	17.80	
INTRACATH NO 20 (INJECTION) ~	9018	180858	06/23	1	12.00	20.10	146.00	
KLICK CLAMP(SURGICAL) ~	9018	GM18G02	06/22	1	12.00	15.86	27.00	
NEUCATH NO 12(SURGICAL) ~	9018	18022201	01/23	1	12.00	25.15	45.00	
PANTOP ZEPOXIN 40 (INJECTION) ~ 40mg	3004	1015631	04/20	3	12.00	120.60	133.00	
PROLENE 1 893 RELY(SURGICAL) ~	9018	3990 PML708	11/22	1	12.00	232.20	254.00	
RL(IV FLUIDS) ~	3004	10180855D	10/20	4	12.00	162.40	190.80	

KRISHNA MEDICAL & GENERAL STORES

D No. 43-5-55, Ply. New Colony, Visakhapatnam - 16

Bill No. : 20,657

D.L.No. : 426/AP/VM/V/2003/RM
 FSS Reg No. : 1 01 14 028 000423

GST : 37AEQFK4594R1ZA
 Date : 13/10/18

Patient : MS E ARUNA KUMARI

Doctor : DR. K. KAMALA

Description	HSN	Batch No.	Exp. Dt	Qty.	GST %	Our Sale Price	MRP Incl GST
SPINAL NEEDLE 26 (NEEDLE) ~	3004	1704013	03/22	1	12.00	105.04	149.00
SPIRIT (LOTION) ~ 100ml	3004	18G1573	12/19	1	12.00	25.81	36.00
SUPRACETRON (INJECTION) ~	3004	FL-275	07/19	1	12.00	15.15	16.50
2mg/ml UROBAG (SURGICAL) ~	9018	GN186029	06/22	1	5.00	80.80	190.00
XONE (INJECTION) ~ 1gm	3004	2019 8183452	03/21	10	12.00	503.00	566.60
Total:						2588.00	3,660.63

For Krishna Medical & General Stores

paid by me

Note : * 50% CGST and 50% SGST
 Note : Goods once sold will not be taken back.

2nd
 2nd tier - 2-

2588
 Absorbent - 61

144
 Betadine Scrub - 132

2825

Pharmacist

Dr. K. KAMALA

M.B.B.S.,

Regd. No. 13961

Sr. Aruna Kumar

Tulku Suptd

(2)

2

Arundhati
Mandal Educational Officer
M.P. Atchutapuram Mandal
Visakhapatnam-531 011

PP Dr. P.P. Srinivasa Murthy MD., DGO
Regd. No: 9255
Addl. Director
Rtd. Professor & Head of Dept. of
Obstetrics & Gynaecology
ANDHRA MEDICAL COLLEGE
CIVIL SURGEON
King George Hospital
VISAKHAPATNAM-530016



KRISHNA MATERNITY & NURSING HOME

"RAMCHANDER", D.No. 43-5-53, Railway New Colony,
VISAKHAPATNAM - 530 016. & : 2720769, 2735571

KRISHNA MEDICAL & GENERAL STORES

D No. 43-5-55, Rly. New Colony, Visakhapatnam - 16

Bill No. : 20,688

D.L.No. : 426/AP/VW/V/2003/RN GST : 37AEQPK4594R12A
 FSS Reg No. : 1 01 14 028 000423 Date : 13/10/19

Patient : MS E ARUNA KUMARI

Doctor : DR. K. KAMALA

Description	HSN	Batch No.	Exp. Dt	Qty.	GST %	Our Sale Price	MRP Incl GST
JUSTIN(SUPPOSITORIES) ~ 100mg	3004	BNP274275	05/21	2	12.00	21.94	23.20
Total :						22.00	23.20

For Krishna Medical & General Stores

Note : * 50% CGST and 50% SGST
 Note : Goods once sold will not be taken back.

Pharmacist

Paid by me



Handwritten Signature
 M.P. Atchutapuram Mandal
 Visakhapatnam-531011

Handwritten Signature
 Dr. K. Kamala
 Professor & Head of Department
 King George Hospital
 VISAKHAPATNAM-530016
 CIVIL SURGEON

KRISHNA PHARMACY

B/S. Azma Kumari

- Dexolac - 1
- feeding bottle - 1
- Moktel Drops - 1
- Vit D₃ Drops - 1
- Demadon Soap - 1
- Demadon Cream - 1

Handwritten signature
Mandal Educational Officer
A.P. Alchutapuram Mandal
Visakhapatnam-531 011

Dr. P. P. Srinivasa Murthy MD., DGO
Regd. No: 9255 Addl. Director
Rtd. Professor & Head of Dept. of
Obstetrics & Gynaecology
ANDHRA MEDICAL COLLEGE
CIVIL SURGEON

King George Hospital
VISAKHAPATNAM-530015

KRISHNA
Children's Hospital

43-4-23, Railway New Colony,
Visakhapatnam-16.

☎ 0891-251456 | 9 am to 9 pm

☎ 0891-2729769, 2735571 | 9 pm to 9 am

GST: 37ABVPM2162K1Z3

CASH / CREDIT BILL

Date: 13.10.18

NIVASA PHARMACY

43-9-20, Rly. New Colony, Visakhapatnam - 530016.

Ph : 9849078145
2720732

125/AP/PM(N)2002NW &R/R
25/AP/PM(N)2002NW & R/R

Food Licence No. : 1012012013002837
TIN:37881268440

Customer's Name

Dr. K. Venkatesh

Sl. No.	PARTICULARS	B.No.	Expiry	Rs.	Ps.
100	Deodorant			200	0
101	Deodorant cream	006	4/15	145	0
102	Deodorant Soap	081	2/14	140	0
103	Washers DS	1805	2/14	103	0
104	Baby formula			55	0
				<u>757</u>	0

E.&O.E

Signature

Goods once sold will not be taken back
N.B. : Prices are inclusive of all taxes

NET: 9.00% / 1.66

43-4-23/1, GROUND FLOOR, RAILWAY NEW COLONY, VISAKHAPATNAM-500015

TIN No: 37252048859 DL No: AP/03/01/2016-134912
GSTIN No: 37AKKPC511E1ZN

3/10/18 18:34

Patient Name: B/O. ARUNA KUMARI

Ref. Name: DR. CH. PHANI KRISHNA

Products

Mediketal 30ml Drops
2108 KEPLER

Batch	Qty	Rate	Dis	Amt	CGST	SGST
NF1819034 12/19	1	100.43	0.00	100.43	7.66	7.66

Billed By: K. HEMANTH

Total Items: 1
Total Tax: 15.32

CGST: 9.00% 7.66
SGST: 9.00% 7.66
CGST Taxable: 9.00% 42.56
SGST Taxable: 9.00% 42.56

Tax Invoice

CASH BILL

BILL# 003066

DEV# 1/INV# 12146

One Hundred Rupees and Fourty-Three Paise

Paid by me
Net Amount: 100.43

Wish You A Speedy Recovery

Signature of Pharmacist

Dr. K. KATNALA

M.B.B.S.,

Regd. No. 13961

15/10/11

E. Anna kuni

103/A


T. Panchop - 10

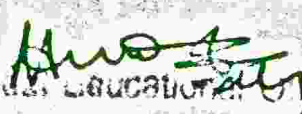
T. Hicet 2004 - 10

T. Serani - D - 10

Cosmopa big pm

Red

 **Dr. P.P. Srisivasa Murthy M.D., DGO**
Regd. No: 9255
Addl. Director
Asst. Professor & Head of Dept. of
Obstetrics & Gynaecology
ANDHRA MEDICAL COLLEGE
CIVIL SURGEON
King George Hospital
VISA KHAPATNAM - 530016


M.P. Atchutapuram
Mandal
Visakhapatnam - 530 011



KRISHNA MATERNITY & NURSING HOME

"RAMCHANDER", D.No. 43-5-53, Railway New Colony,
VISA KHAPATNAM - 530 016. & : 2720769, 2735571

KRISHNA MEDICAL & GENERAL STORES

D No. 43-5-55, Rly. New Colony, Visakhapatnam - 16

D.L.No. : 426/AP/VM/V/2003/RN

GST : 37AEQPK4594H1ZA

20809

FSS Reg No. : 1 01 14 028 000423

Date : 15/10/18

Patient : MS E ARUNNA KUMARI

Doctor : DR. K. KAMALA

DESCRIPTION

DESCRIPTION	HSN	Batch No.	Exp. Dt	Qty.	GST %*	Our Sale Price Incl GST	MRP
HICEF-200 (TABLET) ~ 200mg	30042099	HCM1804	07-20	10	12.00	96.90	100.00
LEUKOMED STERIZONE (DISPOSABLE SYRINGE) ~	30059040	NW73/1801106-21		1	12.00	96.86	106.00
PANTACT (TABLET) ~ 40mg	3004 8004		03-20	10	12.00	56.30	59.50
SERAX-D (TABLET) ~	30049084	M25010	05-21	10	12.00	84.10	89.00
Total :						334.00	354.50

For Krishna Medical & General Stores

Paid by
Pharmacist

Note : * 50% CGST and 50% SGST
Note : Goods once sold will not be taken back.

KRISHNA MEDICAL & GENERAL STORES

D No. 43-5-55, Rly. New Colony, Visakhapatnam - 16

No. : 21163

D.L.No. : 426/AP/VM/V/2003/RN GST : 37AEQPK4594R1ZA
 FSS Reg No. : 1 01 14 028 000423 Date : 18/10/18

Patient : MS E ARUNA KUMARI

Doctor : DR. K. KAMALA

Description	HSN	Batch No.	Exp. Dt	Qty.	GST %	Our Price	Sale Price	MRP
CLIVITAL (CAPSULE) ~	21069099	SLT0008	10-19	10	18.00	111.80	125.00	64.42
DREZ POWDER (A) ~ 10mg	30049023	18-DSP-29(05-21	11-19	10	18.00	104.30	110.00	72.50
FEROCHEM-XT (TABLET) ~	2106	JUT120	12-18	10	12.00	68.50	110.00	95.87
GEMCAL-D3 (CAPSULE) ~	3401	GCCSG17005	06-21	20	12.00	104.00	95.87	95.87
LACTARE (CAPSULE) ~	30049011	DEA298	06-21	1	12.00	90.60	95.87	95.87
SOFINOX (CREAM) ~ 10gm	3004	SFX827	06-21	1	12.00	90.60	95.87	95.87
Total :						540.00	577.79	

For Krishna Medical & General Stores

Note : * 50% CGST and 50% SGST
 Note : Goods once sold will not be taken back.

Paid by me
 Pharmacist

DR. PHANI KRISHNA CHARITRY

M.B.B.S., M.D., (Paediatrics)

Regd. No. 65231,

D.No. 43-4-23, Railway New Colony, Visakhapatnam - 530 016

RECEIPT

Date

18/10/18

2979

Received with thanks from Sri/Smt.

B10. E. Aruna Kumari

the sum of Rupees

Seven Hundred Fifty only

by Cash, towards consultation / Vaccination.

Dr. Ch. Phani Krishna
M.B.B.S., M.D., (Paediatrics)

(DR. CH. PHANI KRISHNA)

Signature

Paid by me

₹. 750/-

Children's Hospital (Regd. No- 65231)

Railway New Colony,
Visakhapatnam - 530016

Phone: 0891-2720769, 2735571

ARUNA KUMARI
Patient Id P11914
919701264803

Female, 5 Days

By: Dr. Ch. Phani krishna M.D., (Paediatrics.)

Payments

Date: 18 Oct, 2018
Receipt Number: RCPT36002

Received with thanks, amount of 1,500.00 INR towards the following :

Date: 18 Oct, 2018
Invoice Number: INV35776

#	Treatments & Products	Unit Cost INR	Qty	Total Cost INR
1.	PHOTOTHERAPY Date 18 Oct, 2018	1,500.00	1	1,500.00

Total Cost: 1,500.00 INR

Grand Total: 1,500.00 INR

Amount Received on 18 Oct, 2018: 1,500.00 INR

Balance Amount on 18 Oct, 2018 : 0.00 INR

Mode of Payment : Cash

Paid by me

Dr. P.P. Srinivasa Murthy MD., DGO
Addl. Director

Regd. No: 9255

Rtd. Professor & Head of Dept. of

Obstetrics & Gynaecology

ANDHRA MEDICAL COLLEGE

CIVIL SURGEON

King George Hospital

VISAKHAPATNAM-530016

Page 1 of 1

Generated On: 18 Oct 2018

M.P. Atchutapuram
Mandal Educational Officer
M.P. Atchutapuram Mandal
Visakhapatnam-531011

KRISHNA PHARMACY

16/10/18

Blo. Anuma Kumari

1513 < 4T
50

Dy
F/ch

BGR

131T4:1SH

550/-

Dr. P.P. Srinivasa Murthy MD., DGO
Regd. No: 9255 Addl. Director
Rtd. Professor & Head of Dept. of
Obstetrics & Gynaecology
ANDHRA MEDICAL COLLEGE
CIVIL SURGEON
King George Hospital
VISAKHAPATNAM-530016

M.P. Atchutapuram
Mandal Educational Officer
M.P. Atchutapuram Mandal
Visakhapatnam-531 011

RHEA - LAB

Ph : 2720769
2735571

C/O. KRISHNA MATERNITY & NURSING HOME
43-5-53, Rly. New Colony, Visakhapatnam - 16.

No. **165**

Date : 16/10/18

Received with thanks from Sri / Smt. _____

B/o. Aruna Kumar

(Rupees _____)

Five hundred Fifty _____ only)

being the charges for the following Investigations :

TSB. BGT

TSB TS1A

₹. 550 ✓

For RHEA-LAB
Paid by me
Authorised Signatory



KRISHNA

Maternity & Nursing Home

Regd No. 78

"Ramchander" # 43-5-53,
Railway New Colony,
Visakhapatnam-16.
0891-2720769, 2735571

In Patient Final Bill

Semi Detailed

Bill No : FB1175
 Bill Date : 18-Oct-2018 03:01 PM
 Patient Name : Mrs. ARUNA KUMARI E
 Date Of Admission : 13-Oct-2018 11:23 AM
 Consultant : DR. P.P.S MURTHY (MD.DGO)
 Department : GYNAECOLOGY
 Address : D NO 31-38-282/3/1, RASALAMMA COLONY,
 DUVVADA, GAJUWAKA, VSP,
 VISAKHAPATNAM, ANDHRA PRADESH

Admission No : IP1426
 Bill Date : 18-Oct-2018 03:01PM
 S-W-D-B/O : B THOTA BABU
 UMR No : UMR7280
 Age / Sex : 30Y(s)/FeMale
 Admitted Ward : PRE-LABOUR ROOM / PLR2
 Referral : WALKIN

Hospitalisation Charges From 13-Oct-18 11:23:47AM To 18-Oct-18 3:01:19PM

Service Code	Services / Investigation	Qty.	Rate	Amount
Ward Charges				6,075.00
EMERGENCY				1,000.00
EME4	ICU CHARGES	1	* 1,000.00	1,000.00
HOSPITALITY SERVICES				5,075.00
HSP41	HALFDAY CHARGES	1	* 575.00	575.00
HSP29	SHARING SMALL NURSING CHARGES	5	* 350.00	1,750.00
HSP28	SHARING SMALL ROOM CHARGES	5	* 550.00	2,750.00
Consultation Charges				1,250.00
HOSPITALITY SERVICES				1,250.00
HSP46	DOCTOR VISITS	5	* 250.00	1,250.00
Service Charges				4,000.00
OT CHARGES				4,000.00
OTC01	OT CHARGES	1	* 4,000.00	4,000.00
Professional Charges				2,000.00
HOSPITALITY SERVICES				2,000.00
HSP38	ASSISTING SURGEON FEE	1	* 2,000.00	2,000.00
Gross Amount				13,325.00
Concession Amount (-)				500.00
Net Amount				12,825.00
Receipt Amount				12,825.00

Receipt / Payment Details

Recpt. No.	Recpt. Dt.	Cash Amt	Cheque Amt	Card Amt	Recpt. Amt.	Remarks
16734	18-Oct-18	12,825.00	0.00	0.00	12,825.00	Receipts :
Total					12,825.00	

[Signature]
 Mandal Education Officer
 M.P. Atchutapuram Mandal
 Visakhapatnam-531011

[Signature]
 Dr. P.P. Srinivasa Murthy MD
 Regd. No: 9255 Addl. Director
 Rtd. Professor & Head of Dept. of
 Obstetrics & Gynaecology
 ANDHRA MEDICAL COLLEGE
 CIVIL SURGEON
 King George Hospital
 VISAKHAPATNAM-500016

Patient Name : MRS. ARUNA KUMARI E

Admission No : IP1426

[Handwritten Signature]

Total Received Amount in Words:

rupees twelve thousand eight hundred twenty-five only
rupees thirteen thousand three hundred
twenty-five only

Authorized Signatory

Remarks :

Prepared Dt 18-Oct-2018 03:01 PM

Prepared By RADHIKA

Printed On 18-Oct-2018 03:01:21 PM

Printed By RADHIKA

Krishna Maternity & Nursing Home
"RAMCHANDER"

Dr.P.P.Srinivasa Murthy MD., DGO
Regd. No: 9255
Addl. Director

43-5-53, Rly New Colony,
VISAKH. PATNAM - 530016
Ph.no. 2735571

Obstetrics & Gynaecology
AND
GENERAL SURGEON
King George Hospital
VISAKH. PATNAM-530016

[Handwritten Signature]

M.P. Aruna
V. Sakhi Patnam
530016

P.P. SRINIVASA MURTHY

No.

Regd. No. 9255

M.D. DGO.,

71

Professor of Obstetrics and Gynaecology
Civil Surgeon, Obstetrician & Gynaecologist
A.P. Medical & Health Services

Date :

13/10/18

Received with Thanks from Sri/Smt. _____

E. Arumakumari

Rs _____

fourteen thousand only

Towards Consultation / Surgery _____

Regd. No. 9255

Addl. Director

Rtd. Professor & Head of Dept. of

Mandal Education Officer

Obstetrics & Gynaecology

M.P. Atchutapuram

ANDHRA MEDICAL COLLEGE
CIVIL SURGEON

Rs. 14500/-

Visakhapatnam-531014

King George Hospital

KAMESH CHANDRA

No. **14**

Regd. No. 53052

M.B.B.S., D.A., M.D

ANAESTHESIOLOGIST

VISAKHAPATNAM.

Date: 13.10.18

Received with Thanks from Sri/Smt :

E A Sreena Kumari

Rs

Thousand

Towards Consultation / Surgery

Anaesthesia

Rs.

3000/-

M. P. Atshurapuram Mandal

Visakhapatnam-531011


Dr. P. KAMESH CHANDRA

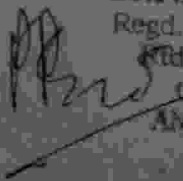
Regd. No. 53052

Signature


Visakhapatnam


Name of the Medicines	Qty	Price
Anawin	1	25.15
→ Atropine	1	3.74
→ Bandages 6 (Surgical)	1	18.28
→ Bandages 6 (Surgical)	9	170.91
→ Blade No 22	2	6.26
→ Cevixuse - 600mg	1	70.50
→ Chromic 0 4242 Rely	1	128.88
→ Chromic 1 4227 Rely	1	191.50
→ Cotton - 100gm	1	54.54
→ Dextrose 5 percent	1	30.20
→ DispoVan 10CC	9	54.54
→ DispoVan 2CC	6	13.32
→ DispoVan 5CC	6	18.18
→ DNS	3	87.87
→ Dolus - 2ml	5	95.95
→ Easy Fix Leukomed	1	20.00
→ Gloves NO-6.5 g	4	120.00
→ Gloves NO 7g	4	119.60
→ I V set (Injection)	1	20.40
→ Infant feeding tube	1	15.76
→ Injek (0.5ml Injection)	1	16.16
→ IntraCath NO 20	1	20.10


 Mandal Educational Officer
 M.P. Atchutapuram Mond
 Visakhapatnam-531 011


 Dr. P.P. Srinivasa Murthy MD, DCO
 Regd. No: 9255 Add. Director
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 Obstetrics & Gynaecology
 ANDHRA MEDICAL COLLEGE
 CIVIL SURGEON
 King George Hospital
 VISAKHAPATNAM-530 011

nick clamp	1	15.86
Nelcath No 12	1	25.15
→ Pantop zepoxim 40	3	120.60
→ Prolene 1 883 Rely	1	232.20
→ RL (IV Fluids)	4	162.40
→ spinal Needle 26	1	105.04
→ spixit (Lotion)	1	25.81
→ supracetson (inj)	1	15.15
→ Usobag	1	80.80
→ xone - 1gm	10	503.00
→ Justin	2	22.00
→ Dexolac	1	278.00
→ feeding bottle	1	143.00
→ Muktal drops	1	170.00
→ vit D ₃ drops	1	103.00
→ Body soaps	1	57.00
→ Dermadow cream	1	100.43
→ Hicef - 200	10	96.90
→ Leukomed sterizone	1	96.86
→ Pantact	10	56.30
→ sesax	10	84.10


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 King George Hospital
 VISAKHAPATNAM - 590015


 Mandal Executive Officer
 M.P. Achalapuram Mand
 Visakhapatnam-531014

divital	10	111.80
Drez powder	1	60.90
→ Fexochem	10	104.30
→ Gemcal -D ₃	10	68.50
→ Lactase	20	104.00
→ Sofinox	1	90.60
→ children specialist fees -		750.00
→ Phototherapy -		1500.00
→ Lab tests -		550.00
→ Ward charges -		6075.00
→ Consultation charges -		1250.00
→ Service charges -		4000.00
→ Hospitality services -		2000.00
		[Concession Amount = -500.00]

Dr. P.P. Srinivasa Murthy (Surgery) = 14000

Dr. P. Kamesh Chandra (Anaesthesia) = 3000

Total Amount = 37460.54

Dr. P.P. Srinivasa Murthy MD, DGO
 Regd. No. 9255 Addl. Director
 Rtd. Professor & Head of Dept. of
 Obstetrics & Gynaecology
 ANDHRA MEDICAL COLLEGE
 CIVIL SURGEON
 King George Hospital
 VISAKHAPATNAM - 580016

Mandar Educational Officer
 M.P. Achutapuram-Mandla
 Visakhapatnam-531011